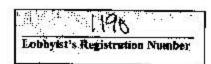
LOBBYING EXPENDITURE REPORT COVERING JANUARY 1 THROUGH JUNE 30, 2016 DUE AUGUST 15	Lobbylst's Registration Number
COVERING JULY 1 THROUGH DECEMBER 31, 20 DUE FEBRUARY 15	FOR OFFICE USE ONLY Postmark Date: 2/22/08
Instructions	ER2(2/08)
Print in ink or type. Fill in Registration Number in spaces provided. Check the box that identifies which report is being filed and fill in the report is covering in the space provided. Complete form and return to the Board of Ethics, 2415 Quail Dr., 3 rd Ebston Rouge, LA 70808 (225) 763-8777 or (800) 842-6630. This form may be fexed to (225) 763-8787. The report covering July 1- Dec. 31 is a camulative report. You must information from the first half of the year.	1071796
Name TELOUIS PICALES Business Address ONS AMERICAN PIALE Street and No.	Suite 900 Buton Pouge VI
Mailing Address SUME Business Phone (235) 28 A -01000	
Area Code and Telephone Number Total of all expenditures made January 1 through June 30 (Include expenditures from Schedules A and B)	: \$
Total of all expenditures made July 1 through December 1 (When Applicable) (Include expenditures from Schedules A and B)	
Total of all expenditures made during calendar year: (Line 4 added with Line 5 should equal Line 6)	\$
Did you make an expenditure exceeding \$50 on one occas	sion for any one legislator:
From January 1 through June 30?	DINO INA
If the answer to either question in Number 7 above is YES	. please complete Schedule A and attach.

Fore 502, Rev. 03104

LOBBYING EXPENDITURE REPORT



	From January 1 through June 30?	□ Ycs	⊠ No	er	
	From July 1 through December 31?	□Yeş	LYNO	(i)	NA
	If the answer to either question in Nur	nber 8 abovo is	YES, please comp	plete Scf	nedule A and attach.
9.	Did you expend funds for a reception, social gathering, or other function to which the entire legislature, either house, any standing committee, select committee, statutory committee, committee created by resolution of either house, subcommittee of any committee, recognized caucus, or any delegation thereof were invited during this reporting period?				
	□Yes		₩.No		
	If the answer to Number 9 above is YI	ES. please com	ntete Schedule B :	mri attar	h
	CE	RTIFICATION	DF AQCURACY		
		00.110.00.00.00.00.00.00.00.00		el to th	c best of my knowledg
	CER I hereby certify that the information of information, and belief; that all reports	contained herein	ı is true and come		3.9
	I hereby certify that the information of	contained herein	is true and corre	ed herei:	n; and that no information

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